

Wisconsin Medicaid and BadgerCare update

September 2005 • No. 2005-XX

Wisconsin Medicaid and BadgerCare Information for Providers

To:

All Providers

HMOs and Other
Managed Care
Programs

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800)947-9627 or (608)221-9883 or visit our Web site at dhfs.wisconsin.gov/medicaid/.

PHC 1250

Assistance for Hurricane Katrina Evacuees

Hurricane Katrina's aftermath is bringing some evacuees to Wisconsin. The Department of Health and Family Services (DHFS) is providing information and assistance to Hurricane Katrina evacuees.

Some evacuees are arriving on their own, while others are arriving through an established reception center. The DHFS is encouraging all evacuees to apply for Wisconsin Medicaid and FoodShare Wisconsin.

An expedited recipient eligibility process has been established for Wisconsin Medicaid. Eligibility applications will be promptly reviewed, and those determined eligible will receive temporary identification cards for Wisconsin Medicaid.

Evacuees Without Health Insurance Coverage

Providers are encouraged to provide necessary health care to evacuees without health insurance coverage. Providers should obtain information about the evacuee and refer him or her to a county/tribal social or human services agency or Medicaid outstation site where the evacuee can apply for Wisconsin Medicaid retroactive to their date of arrival in Wisconsin. A list of county/tribal social or human service agencies and Medicaid outstation sites is available on the Recipient section of the Medicaid Web site at dhfs.wisconsin.gov/medicaid/.

Providers should collect the following information from evacuees to assist with eventual Medicaid billing:

- Name. (If applicable, providers should obtain the evacuee's given name and maiden name.)
- Social Security number.
- Date of birth.
- Previous address.
- Current address, if applicable.
- Telephone number, if applicable.
- General contact information.
- Name of parents or guardians, as applicable, if the evacuee is under age 18.

Wisconsin Medicaid Applicants with Temporary Identification Cards

All Medicaid certifying agencies have the authority to issue paper temporary identification cards to applicants who meet Medicaid eligibility requirements. Temporary cards may be issued to applicants, including Hurricane Katrina evacuees, who are in need of medical services prior to receiving the standard Forward card. Providers should accept temporary cards as proof of eligibility. Eligible applicants may receive Medicaid-covered services for the dates shown on the card. Providers should refer to Attachment 1 of this *Wisconsin Medicaid and BadgerCare Update* for a sample of the temporary card.

Providers are encouraged to keep a photocopy of the temporary card and should delay submitting claims for *one week* from the eligibility start date until the eligibility information is transmitted to the Medicaid claim system. Providers should refer to the All-Provider Handbook for more information about temporary cards.

Medicaid Clients from Other States

Some Medicaid clients from other states may seek health care in Wisconsin.

Option 1

Providers are encouraged to advise clients to seek coverage from Wisconsin Medicaid. In this case, providers may provide necessary health care to clients from other states. Providers should obtain information about the evacuee and refer him or her to a county/tribal social or human services agency or Medicaid outstation site where the evacuee can apply for Wisconsin Medicaid. Providers should collect the

information listed previously under “Evacuees Without Health Insurance Coverage.”

Option 2

Providers may provide services to these clients and seek reimbursement from the client’s state Medicaid program. Providers will generally be required to register with that state’s Medicaid program. Some states have established an expedited provider enrollment process through their Web sites. Attachment 2 of this *Update* contains contact information for Louisiana, Mississippi, Alabama, and Florida Medicaid. Pharmacy providers billing Louisiana should refer to the “Memo from Louisiana Medicaid’s Fiscal Agent, Unisys Corporation, for Pharmacy Claims.”

For More Information

For the most up-to-date information on addressing health care needs of Katrina evacuees, refer to the DHFS Web site at dhfs.wisconsin.gov/.

Memo from Louisiana Medicaid’s Fiscal Agent, Unisys Corporation, for Pharmacy Claims

To all state Medicaid:

Many of you have valid questions regarding how to reimburse providers for pharmacy services rendered to Hurricane Katrina evacuees that are now residing in shelters within your state. Since telephone service is still tenuous and calls are difficult to get through, the following information is provided.

* Fast-track Provider Enrollment information is available on the Louisiana Department of Health and Hospitals’ Provider website, www.lamedicaid.com.

* Some claims edits have been modified to facilitate payment to out-of-state providers serving this population.

* Claims may be transmitted to Louisiana Medicaid’s fiscal agent, Unisys Corporation, using the Point of Sale Pharmacy Claims payment system. Vendor specifications, including the Louisiana Medicaid BIN Number, are available on www.lamedicaid.com under the link for HIPAA Billing Instructions and Companion Guides. The specifications are at the bottom of the accessed page.

* You may also retrieve a copy of the POS Users Manual at this same web site under the Pharmacy link.

* Enrolled Pharmacy providers may access Louisiana Medicaid recipients’ clinical drug histories up to four months. This information is available through the electronic Clinical Data Inquiry (e-CDI) at www.lamedicaid.com. Providers should follow the instructions for the log-in process to access this information.


* Pharmacy Providers can call the Unisys POS Helpdesk at 800-648-0790 or 225-216-6381. Providers can also call La DHH PBM unit at 800-437-9101 or 225-342-9768.

Every measure is being taken to accept and pay these claims in a timely manner. We appreciate your cooperation in serving Louisiana displaced residents.

ATTACHMENT 1

Sample Temporary Identification Card

(actual card is green in color)

AGENCY		MED STAT		ELIGIBLE FOR DATES	
ID NUMBER	ELIGIBLE RECIPIENTS	BIRTHDATE	SEX	OTHER COVERAGE	
					
<p>OUT-OF-STATE NON-EMERGENCY SERVICES REQUIRE PRIOR AUTHORIZATION. YOUR PROVIDER MUST WRITE TO: WISCONSIN MEDICAID OUT-OF-STATE PRIOR AUTHORIZATION STE 98 5406 BRIDGE RD MADISON WI 53704-0088</p>					
<p style="text-align: right;">STATE OF WISCONSIN MEDICAID AND BADGERCARE PROGRAMS TEMPORARY IDENTIFICATION CARD TXXXXXX</p>					

**WISCONSIN MEDICAID AND BADGERCARE PROGRAMS
RECIPIENT SERVICES
PO BOX 8678
MADISON WI 53716-0678**

NOTICE TO RECIPIENTS:

THIS IS A TEMPORARY MEDICAID AND BADGERCARE IDENTIFICATION CARD. IT IS VALID FOR THE DATES SHOWN ON THE FRONT. KEEP THIS CARD WITH YOU UNTIL IT EXPIRES, OR UNTIL YOU RECEIVE A PERMANENT IDENTIFICATION CARD.

FOR QUESTIONS REGARDING:
COVERED SERVICES, CALL 1-800-362-3002 (TTY AVAILABLE).
ELIGIBILITY, CALL YOUR CERTIFYING AGENCY.

NOTICE TO PROVIDERS:

THE INFORMATION ON THIS TEMPORARY MEDICAID CARD IS MANUALLY COMPLETED BY THE CERTIFYING AGENCY. THIS CARD MAY BE PRESENTED BEFORE THE ELIGIBILITY INFORMATION IS TRANSMITTED TO THE MEDICAID FISCAL AGENT; HOWEVER, MEDICAID ELIGIBILITY IS GUARANTEED FOR THE DATES SHOWN ON THE FRONT. IT IS IMPORTANT TO PROVIDE SERVICES WHEN THIS CARD IS PRESENTED. REFER TO THE ALL-PROVIDER HANDBOOK FOR FURTHER INFORMATION REGARDING THE TEMPORARY IDENTIFICATION CARD. PROVIDERS ARE ENCOURAGED TO KEEP A PHOTOCOPY OF THIS CARD.

ATTACHMENT 2

Contact Information for Louisiana, Mississippi, Alabama, and Florida Medicaid

Louisiana Medicaid		www.dhh.state.la.us/offices/?ID=92
To enroll as a Louisiana Medicaid provider, providers should download the Emergency Provider Enrollment Packet: Basic Enrollment Packet from <i>www.lamedicaid.com/</i> . If Web access is unavailable, providers should call Provider Enrollment or Provider Relations to request this packet.		
General Information	(888) 342-6207	
Pharmacy Program	(225) 342-9768	
Recipient Eligibility Verification System (REVS)	(800) 776-6323	
Louisiana Medicaid recipients who are enrolled in CommunityCARE and displaced by Hurricane Katrina may seek needed medical care from any Medicaid provider. No CommunityCARE referral is required. These recipients must go to a provider who agrees to accept Louisiana Medicaid as payment. For more information about CommunityCARE, providers may refer to <i>www.la-kidmed.com/communitycare/commcare.html</i> .		
<i>Note:</i> Louisiana Medicaid is experiencing a larger-than-usual call load, and the hurricane has hindered many of the telephone lines. Providers who cannot reach anyone on the telephone may e-mail <i>MedWeb@dhh.la.gov</i> . E-mails are answered within one business day, when possible. Providers may also call Wisconsin Medicaid's Provider Services at (800) 947-9627 (608) 221-9883. Wisconsin Medicaid's correspondents will assist providers trying to reach other state Medicaid programs.		

Mississippi Medicaid		<i>msmedicaid.acs-inc.com/index.jsp</i>
To enroll as a Mississippi Medicaid provider, providers should refer to <i>www.dom.state.ms.us/</i> or call Provider Enrollment.		
General Information	(800) 884-3222 — select option 6 or stay on the line	
Provider Enrollment	(800) 884-3222 — select option 4	
Pharmacy Program	(800) 884-3222 — select option 1	
REVS	(800) 884-3222 — select option 3 and then 2	

Alabama Medicaid		<i>medicaid.state.al.us/</i>
To enroll as an Alabama Medicaid provider, providers should refer to <i>medicaid.state.al.us/billing/provider_enroll_contact.aspx?tab=6&sub=2</i> or call Provider Enrollment.		
Provider Information	(334) 215-0111	
Provider Enrollment	(334) 215-0111	
Pharmacy Program	(800) 748-0130	
REVS	(334) 215-0111	

Florida Medicaid		<i>www.fdhc.state.fl.us/Medicaid/index.shtml/</i>
To enroll as a Florida Medicaid provider, providers should refer to <i>www.flmedprovenroll.com/index.jsp</i> or call Provider Enrollment.		
Provider Information	(888) 419-3456 — select option 3	
Provider Enrollment	(800) 377-8216	
REVS	(800) 289-7799	